Case 1:24-cr-20255-WPD Document 231-30 Entered on FLSD Docket 11/07/2025 Page 1 of 27

From: King Kimchi <consulting012345@gmail.com>

Sent: Tue 10/6/2020 1:16:10 PM (UTC)

To: AbbieD@safechain.com, compliance@safechain.com,

CharlesB@safechain.com, dakotaf@safechain.com

Attachment: Binder-09282020.pdf

Everything is done let me know

GOVERNMENT EXHIBIT 186 1:24-cr-20255-WPD

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT

NDC: 59676-0575-30

Lot Number Quantity Unique Serial #
19BG119X 1

Reference Number: INV6917

Document Type: INVOICE

Reference Date: 09/28/2020

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SOLD TO:

SHIPPED TO:

Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,
Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,

NJ 07004 NJ 07004

Date Purchased & Ref: 09/12/18 PO#R2380 Date Received & Ref: 09/12/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX | Name: Instacare Pharmacy DBA Brookville RX

Address: 235-20 147th Ave Rosedale, NY 11422 Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: 10/28/18 PO#001IC568 Date Received & Ref: 10/28/18

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref : 11/26/19 PO#01209692 Date Received & Ref : 11/26/19

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR SAFE CHAIN SOLUTIONS, LLC

822 CHESAPEAKE DR B21613 B22 CHESAPEAKE DR CAMBRIDGE MD 21613 B22 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 Date Received & Ref: 09/28/20

SOLD TO:
Name:
Address:
SHIPPED TO:
Name:
Address:
Address:

Date Purchased & Ref : Date Received & Ref :

- (A) is authorized as required under the Drug Supply Chain Security $\operatorname{\mathsf{Act}}$;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT

NDC: 59676-0562-01

Lot Number Quantity Unique Serial # 19DG222 2

Reference Number: IN V 6913

Document Type: INVOICE

Reference Date: 09/28/2020

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SOLD TO:

SHIPPED TO:

Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,
Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,

NJ 07004 NJ 07004

Date Purchased & Ref: 09/06/18 PO#R2372 Date Received & Ref: 09/06/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX Name: Instacare Pharmacy DBA Brookville RX

Address: 235-20 147th Ave Rosedale, NY 11422 Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: 10/29/18 PO#001IC570 Date Received & Ref: 10/29/18

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref : 11/26/19 PO#01209692 | Date Received & Ref : 11/26/19

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR SAFE CHAIN SOLUTIONS, LLC

822 CHESAPEAKE DR CAMBRIDGE MD 21613 Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 Date Received & Ref: 09/28/20

SOLD TO: SHIPPED TO:

Name:
Address:

Name:
Address:

Date Purchased & Ref : Date Received & Ref :

- (A) is authorized as required under the Drug Supply Chain Security $\operatorname{\mathsf{Act}}$;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT

NDC: 59676-0562-01

Lot Number Quantity Unique Serial #
19DG241 4

Reference Number: INV6914

Document Type: INVOICE

Reference Date: 09/28/2020

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SOLD TO: SHIPPED TO:

Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,
Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,

NJ 07004 NJ 07004

Date Purchased & Ref: 09/04/18 PO#R2367 Date Received & Ref: 09/04/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX Name: Instacare Pharmacy DBA Brookville RX

Address: 235-20 147th Ave Rosedale, NY 11422 Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: 10/18/18 PO#001IC555 Date Received & Ref: 10/18/18

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref : 11/26/19 PO#01209692 | Date Received & Ref : 11/26/19

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR SAFE CHAIN SOLUTIONS, LLC

822 CHESAPEAKE DR CAMBRIDGE MD 21613 Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 Date Received & Ref: 09/28/20

SOLD TO:
Name:
SHIPPED TO:
Name:

Name:
Address:

Name:
Address:

Date Purchased & Ref : || Date Received & Ref :

- (A) is authorized as required under the Drug Supply Chain Security $\operatorname{\mathsf{Act}}$;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT

 NDC: 61958-1901-01
 Quantity
 Unique Serial #

 19GV005UA
 2

Reference Number: INV6932
Document Type: INVOICE

Reference Date: 09/28/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SOLD TO:
Name: Rochester Drug Co-Op Inc SHIPPED TO:
Name:

Name: Rochester Drug Co-Op Inc Name: Rochester Drug Co-Op Inc

Address: 116 Lehigh Dr #3013 Fairfield, Address: 116 Lehigh Dr #3013 Fairfield,

NJ 07004 NJ 07004

Date Purchased & Ref: 08/14/18 PO#R2324 Date Received & Ref: 08/14/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX Name: Instacare Pharmacy DBA Brookville RX

Address: 235-20 147th Ave Rosedale, NY 11422 Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: 10/17/18 PO#001IC553 | Date Received & Ref: 10/17/18

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref : 11/26/19 PO#01209692 Date Received & Ref : 11/26/19

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR SAFE CHAIN SOLUTIONS, LLC

822 CHESAPEAKE DR | Address: 822 CHESAPEAKE DR CAMBRIDGE
CAMBRIDGE MD 21613 | MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 Date Received & Ref: 09/28/20

SOLD TO:
Name:
SHIPPED TO:
Name:

Name:
Address:

Address:

Name:
Address:

Date Purchased & Ref : | Date Received & Ref :

- (A) is authorized as required under the Drug Supply Chain Security $\operatorname{\mathsf{Act}}$;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT

NDC: 59676-0800-30

Lot Number Quantity Unique Serial # 20EG062 2

Reference Number: INV6919

Document Type: INVOICE

Reference Date: 09/28/2020

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SOLD TO: SHIPPED TO:

Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,
Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,

NJ 07004 NJ 07004

Date Purchased & Ref: 09/20/18 PO#R2394 Date Received & Ref: 09/20/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX | Name: Instacare Pharmacy DBA Brookville RX

Address: 235-20 147th Ave Rosedale, NY 11422 Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: 10/23/18 PO#001IC562 Date Received & Ref: 10/23/18

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref: 11/25/19 PO#01209744 Date Received & Ref: 11/25/19

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR SAFE CHAIN SOLUTIONS, LLC

822 CHESAPEAKE DR B21613 B22 CHESAPEAKE DR CAMBRIDGE MD 21613 B22 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 Date Received & Ref: 09/28/20

SOLD TO: SHIPPED TO:

Name:
Address:

Address:

Date Purchased & Ref : | Date Received & Ref :

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT

NDC: 59676-0800-30

Lot Number Quantity Unique Serial # 20GG129 5

Reference Number: INV6921

Document Type: INVOICE

Reference Date: 09/28/2020

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SOLD TO:

SHIPPED TO:

Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,
Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,

NJ 07004 NJ 07004

Date Purchased & Ref: 09/07/18 PO#R2374 Date Received & Ref: 09/07/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX | Name: Instacare Pharmacy DBA Brookville RX

Address: 235-20 147th Ave Rosedale, NY 11422 Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: 10/21/18 PO#001IC558 Date Received & Ref: 10/21/18

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref : 11/26/19 PO#01209692 | Date Received & Ref : 11/26/19

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR SAFE CHAIN SOLUTIONS, LLC

822 CHESAPEAKE DR B21613 B22 CHESAPEAKE DR CAMBRIDGE MD 21613 B22 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 Date Received & Ref: 09/28/20

00/20/20 TO#50TT

SOLD TO:
Name:
Name:
Address:

Address:

Date Purchased & Ref : Date Received & Ref :

- (A) is authorized as required under the Drug Supply Chain Security $\operatorname{\mathsf{Act}}$;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

HARVONI TAB 90/400MG 28CT

NDC: 61958-1801-01

Lot Number Quantity Unique Serial # 011131

Reference Number: INV6928 **INVOICE Document Type:**

09/28/2020 **Reference Date:**

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SOLD TO: SHIPPED TO:

Name: Rochester Drug Co-Op Inc Name: Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, 116 Lehigh Dr #3013 Fairfield, Address: Address:

NJ 07004 NJ 07004

Date Received & Ref: 08/08/18 Date Purchased & Ref: 08/08/18 PO#R2315

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX Instacare Pharmacy DBA Brookville RX Name:

235-20 147th Ave Rosedale, NY 11422 Address: Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: PO#001IC525 10/04/18 Date Received & Ref: 10/04/18

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Name: **BOULEVARD 9229 LLC** 9229 QUEENS BLVD STE 11 Address: Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref: Date Received & Ref: 11/27/19 11/27/19 PO#01209694

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC Address: Address: **822 CHESAPEAKE DR CAMBRIDGE**

822 CHESAPEAKE DR CAMBRIDGE MD 21613 MD 21613

Date Purchased & Ref: Date Received & Ref: 09/28/20 09/28/20 PO#9311

SOLD TO: SHIPPED TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

COMPLERA TAB 30CT

NDC: 61958-1101-01

 Lot Number
 Quantity
 Unique Serial #

 016340
 1

Reference Number: INV6922
Document Type: INVOICE

Reference Date: 09/28/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SOLD TO: SHIPPED TO:

Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,
Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,

NJ 07004 NJ 07004

Date Purchased & Ref: 09/04/18 PO#R2367 Date Received & Ref: 09/04/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX Name: Instacare Pharmacy DBA Brookville RX

Address: 235-20 147th Ave Rosedale, NY 11422 | Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: 10/24/18 PO#001IC564 Date Received & Ref: 10/24/18

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref : 11/26/19 PO#01209692 | Date Received & Ref : 11/26/19

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR SAFE CHAIN SOLUTIONS, LLC

822 CHESAPEAKE DR Address: 822 CHESAPEAKE DR CAMBRID
CAMBRIDGE MD 21613 MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 | Date Received & Ref: 09/28/20

SOLD TO:
Name:
Address:

SHIPPED TO:
Name:
Address:

Date Purchased & Ref : || Date Received & Ref :

- (A) is authorized as required under the Drug Supply Chain Security $\operatorname{\mathsf{Act}}$;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

STRIBILD TAB 30CT

NDC: 61958-1201-01

Lot Number Quantity Unique Serial # 016342 1

Reference Number: INV6925

Document Type: INVOICE

Reference Date: 09/28/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SOLD TO: SHIPPED TO:

Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,
Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,

NJ 07004 NJ 07004

Date Purchased & Ref: 08/16/18 PO#R2330 Date Received & Ref: 08/16/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX Name: Instacare Pharmacy DBA Brookville RX

Address: 235-20 147th Ave Rosedale, NY 11422 Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: 10/10/18 PO#001IC538 Date Received & Ref: 10/10/18

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref : 11/26/19 PO#01209692 Date Received & Ref : 11/26/19

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 Date Received & Ref: 09/28/20

00/20/20 PO#3511

SOLD TO:
Name:
Address:

SHIPPED TO:
Name:
Address:

Date Purchased & Ref : || Date Received & Ref :

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT

NDC: 61958-1901-01 **Lot Number** Quantity Unique Serial #

019485

Reference Number: INV6930 INVOICE **Document Type:**

09/28/2020 **Reference Date:**

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SOLD TO: SHIPPED TO:

Name: Rochester Drug Co-Op Inc Name: Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, 116 Lehigh Dr #3013 Fairfield, Address: Address:

NJ 07004 NJ 07004

Date Received & Ref: 08/03/18 Date Purchased & Ref: 08/03/18 PO#R2308

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX Instacare Pharmacy DBA Brookville RX Name:

235-20 147th Ave Rosedale, NY 11422 Address: Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: PO#001IC516 10/01/18 Date Received & Ref: 10/01/18

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Name: **BOULEVARD 9229 LLC** 9229 QUEENS BLVD STE 11 Address: Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref: Date Received & Ref: 11/25/19 11/25/19 PO#01209744

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC Address: Address: **822 CHESAPEAKE DR CAMBRIDGE**

822 CHESAPEAKE DR CAMBRIDGE MD 21613 MD 21613

Date Purchased & Ref: Date Received & Ref: 09/28/20 09/28/20 PO#9311

SOLD TO: SHIPPED TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ODEFSEY TAB 30CT

NDC: 61958-2101-01

Lot Number Quantity Unique Serial # 020235 1

Reference Number: INV6933

Document Type: INVOICE

Reference Date: 09/28/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SOLD TO: SHIPPED TO:

Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,
Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,

NJ 07004 NJ 07004

Date Purchased & Ref: 08/23/18 PO#R2344 Date Received & Ref: 08/23/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX Name: Instacare Pharmacy DBA Brookville RX

Address: 235-20 147th Ave Rosedale, NY 11422 Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: 10/28/18 PO#001IC568 Date Received & Ref: 10/28/18

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref : 11/25/19 PO#01209744 | Date Received & Ref : 11/25/19

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR SAFE CHAIN SOLUTIONS, LLC

822 CHESAPEAKE DR CAMBRIDGE MD 21613 Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 Date Received & Ref: 09/28/20

00/20/20 PO#3511

SOLD TO:
Name:
Address:
SHIPPED TO:
Name:
Address:

Date Purchased & Ref : | Date Received & Ref :

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ODEFSEY TAB 30CT

NDC: 61958-2101-01

Lot Number Quantity Unique Serial # 020236

Reference Number: INV6934 **INVOICE Document Type:**

09/28/2020 **Reference Date:**

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SOLD TO: SHIPPED TO:

Name: Rochester Drug Co-Op Inc Name: Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, Address: Address:

116 Lehigh Dr #3013 Fairfield, NJ 07004 NJ 07004

Date Received & Ref: 08/16/18 Date Purchased & Ref: 08/16/18 PO#R2330

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX Instacare Pharmacy DBA Brookville RX Name:

235-20 147th Ave Rosedale, NY 11422 Address: Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: PO#001IC558 10/21/18 Date Received & Ref: 10/21/18

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Name: **BOULEVARD 9229 LLC** 9229 QUEENS BLVD STE 11 Address: Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref: Date Received & Ref: 11/26/19 11/26/19 PO#01209692

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC Address:

Address: **822 CHESAPEAKE DR CAMBRIDGE 822 CHESAPEAKE DR CAMBRIDGE MD 21613** MD 21613

Date Purchased & Ref: Date Received & Ref: 09/28/20 09/28/20 PO#9311

SOLD TO: SHIPPED TO: Name: Name:

Address: Address:

Date Purchased & Ref: Date Received & Ref:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

DUEXIS TAB 90CT

NDC: 75987-0010-03 **Lot Number** Quantity Unique Serial # 8118137

Reference Number: **Document Type:**

INV6936 INVOICE

Reference Date:

09/28/2020

(TH) Transaction History

Manufacturer's Name: Horizon Pharma USA, Inc.

Manufacturer's informationTwo Tower Place, 12th Floor, South San Francisco, CA 94080

SOLD TO:

Name: Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, Address:

NJ 07004

Date Purchased & Ref: 08/01/18 PO#R2301 SHIPPED TO:

Name: Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, Address:

NJ 07004

Date Received & Ref: 08/01/18

SOLD TO:

Name: Instacare Pharmacy DBA Brookville RX

235-20 147th Ave Rosedale, NY 11422 Address:

Name:

SHIPPED TO:

Instacare Pharmacy DBA Brookville RX

Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: PO#001IC566 10/25/18 Date Received & Ref: 10/25/18

SOLD TO:

Name:

BOULEVARD 9229 LLC

9229 QUEENS BLVD STE 11 Address:

REGO PARK, NY 11374

SHIPPED TO:

Name: **BOULEVARD 9229 LLC**

Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Purchased & Ref: Date Received & Ref: 11/27/19 11/27/19 PO#01209720

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE

MD 21613

Date Received & Ref: 09/28/20

SOLD TO:

Name: Address:

SHIPPED TO:

Name: Address:

Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

DUEXIS TAB 90CT

NDC: 75987-0010-03

Lot Number Quantity Unique Serial # 2 8119915

Reference Number: INV6938 INVOICE **Document Type:**

09/28/2020 **Reference Date:**

(TH) Transaction History

Manufacturer's Name: Horizon Pharma USA, Inc.

Manufacturer's informationTwo Tower Place, 12th Floor, South San Francisco, CA 94080

Name:

Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, Address:

NJ 07004

Date Purchased & Ref: 08/07/18 PO#R2313 SHIPPED TO:

Name: Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, Address:

NJ 07004

Date Received & Ref: 08/07/18

SOLD TO:

SOLD TO:

Name: Instacare Pharmacy DBA Brookville RX

235-20 147th Ave Rosedale, NY 11422 Address:

SHIPPED TO:

Instacare Pharmacy DBA Brookville RX Name:

Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: PO#001IC553 10/17/18 Date Received & Ref: 10/17/18

SOLD TO:

Name:

BOULEVARD 9229 LLC

9229 QUEENS BLVD STE 11 Address:

REGO PARK, NY 11374

Date Purchased & Ref:

SHIPPED TO:

Name: **BOULEVARD 9229 LLC**

Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Received & Ref: 11/26/19 11/26/19 PO#01209692

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address: **822 CHESAPEAKE DR CAMBRIDGE**

MD 21613

Date Received & Ref: 09/28/20

SOLD TO:

SHIPPED TO:

Name: Address:

Date Received & Ref:

Name: Address:

Date Purchased & Ref:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

RAYOS 5 MG

NDC: 75987-0022-01

Lot Number Quantity Unique Serial # 13 19190020A

Reference Number: INV6940 INVOICE **Document Type:**

09/28/2020 **Reference Date:**

(TH) Transaction History

Manufacturer's Name: Horizon Pharma USA, Inc.

Manufacturer's informationTwo Tower Place, 12th Floor, South San Francisco, CA 94080

Name:

Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, Address:

NJ 07004

SHIPPED TO:

Name: Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, Address:

NJ 07004

Date Received & Ref: 08/02/18 Date Purchased & Ref: 08/02/18 PO#R2305

SOLD TO:

SOLD TO:

Name: Instacare Pharmacy DBA Brookville RX

235-20 147th Ave Rosedale, NY 11422 Address:

SHIPPED TO:

Instacare Pharmacy DBA Brookville RX Name:

Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: PO#001IC566 10/25/18 Date Received & Ref: 10/25/18

SOLD TO:

Name:

BOULEVARD 9229 LLC

9229 QUEENS BLVD STE 11 Address:

REGO PARK, NY 11374

SHIPPED TO:

Name: **BOULEVARD 9229 LLC**

Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Purchased & Ref: Date Received & Ref: 11/26/19 11/26/19 PO#01209692

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE

MD 21613

Date Received & Ref: 09/28/20

SOLD TO: Name: Address:

Name: Address:

SHIPPED TO:

Date Purchased & Ref:

Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

PENNSAID 2% TOP SOL 112G/BOTTLE

NDC: 75987-0040-05

Unique Serial # Lot Number Quantity 12 A1157A1

Reference Number: INV6943 INVOICE **Document Type:**

09/28/2020 **Reference Date:**

(TH) Transaction History

Manufacturer's Name: Nuvo Pharmaceuticals Inc.

Manufacturer's information6733 Mississauga Road, Suite 610, Mississauga, Ontario Canada L5N 6J5

Name: Rochester Drug Co-Op Inc

116 Lehigh Dr #3013 Fairfield, Address:

NJ 07004

Name: Rochester Drug Co-Op Inc

116 Lehigh Dr #3013 Fairfield, Address:

NJ 07004

Date Received & Ref: 08/01/18 Date Purchased & Ref: 08/01/18 PO#R2301

SOLD TO:

SOLD TO:

Name: Instacare Pharmacy DBA Brookville RX

235-20 147th Ave Rosedale, NY 11422 Address:

SHIPPED TO:

SHIPPED TO:

Instacare Pharmacy DBA Brookville RX Name:

Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: PO#001IC568 10/28/18 Date Received & Ref: 10/28/18

SOLD TO:

Name:

BOULEVARD 9229 LLC

9229 QUEENS BLVD STE 11 Address:

REGO PARK, NY 11374

Date Purchased & Ref:

SHIPPED TO:

Name: **BOULEVARD 9229 LLC**

Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Received & Ref: 11/26/19 11/26/19 PO#01209692

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE

MD 21613

Date Received & Ref: 09/28/20

Name:

SOLD TO:

SHIPPED TO: Name:

Address: Address:

Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

PENNSAID 2% TOP SOL 112G/BOTTLE

NDC: 75987-0040-05

Unique Serial # Lot Number Quantity A1158A1

Reference Number: INV6941 INVOICE **Document Type:**

09/28/2020 **Reference Date:**

(TH) Transaction History

Manufacturer's Name: Nuvo Pharmaceuticals Inc.

Manufacturer's information6733 Mississauga Road, Suite 610, Mississauga, Ontario Canada L5N 6J5

SOLD TO:

Name: Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, Address:

NJ 07004

Date Purchased & Ref: 08/21/18

SHIPPED TO: Name:

Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, Address:

NJ 07004

Date Received & Ref: 08/21/18 PO#R2337

SOLD TO:

Name: Instacare Pharmacy DBA Brookville RX

235-20 147th Ave Rosedale, NY 11422 Address:

SHIPPED TO:

Instacare Pharmacy DBA Brookville RX Name:

Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: PO#001IC525 10/04/18 Date Received & Ref: 10/04/18

SOLD TO:

Name:

BOULEVARD 9229 LLC

9229 QUEENS BLVD STE 11 Address:

REGO PARK, NY 11374

Date Purchased & Ref:

SHIPPED TO:

Name: **BOULEVARD 9229 LLC**

Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Received & Ref: 11/27/19 11/27/19 PO#01209720

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE

MD 21613

Date Received & Ref: 09/28/20

SOLD TO: Name: Address:

Name: Address:

SHIPPED TO:

Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

STRIBILD TAB 30CT

NDC: 61958-1201-01

Lot Number	Quantity	Unique Serial #
CBHCW	1	

Reference Number: IN V 6924 **INVOICE Document Type:**

Rochester Drug Co-Op Inc

116 Lehigh Dr #3013 Fairfield,

Reference Date:

NJ 07004

09/28/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SOLD TO: SHIPPED TO:

Name: Rochester Drug Co-Op Inc Name: 116 Lehigh Dr #3013 Fairfield, Address: Address:

NJ 07004

Date Received & Ref: 08/07/18 Date Purchased & Ref: 08/07/18 PO#R2313

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX Instacare Pharmacy DBA Brookville RX Name:

235-20 147th Ave Rosedale, NY 11422 Address: Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: PO#001IC570 10/29/18 Date Received & Ref: 10/29/18

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Name: **BOULEVARD 9229 LLC** 9229 QUEENS BLVD STE 11 Address: Address: 9229 QUEENS BLVD STE 11 **REGO PARK, NY 11374**

REGO PARK, NY 11374

Date Purchased & Ref: Date Received & Ref: 11/25/19 11/25/19 PO#01209744

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC Address: Address: **822 CHESAPEAKE DR CAMBRIDGE 822 CHESAPEAKE DR**

CAMBRIDGE MD 21613 MD 21613

Date Purchased & Ref: Date Received & Ref: 09/28/20 09/28/20 PO#9311

SOLD TO: SHIPPED TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT

NDC: 61958-2501-01

Lot Number Quantity Unique Serial #

CCZBZA 1

Reference Number: INV 6902
Document Type: INVOICE

Reference Date: 09/28/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SOLD TO: SHIPPED TO:

Name: Rochester Drug Co-Op Inc

Address: 116 Lehigh Dr #3013
Fairfield, NJ 07004

Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013
Fairfield, NJ 07004

Date Purchased & Ref: 09/13/18 PO#R2383 Date Received & Ref: 09/13/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX
Address: 235-20 147th Ave Rosedale, NY 11422 | Name: Address: 235-20 147th Ave Rosedale, NY 11422 | Address: 235-20 147th Ave Rosedale, NY 11422

Address. Address.

Date Purchased & Ref: 10/10/18 PO#001IC538 Date Received & Ref: 10/10/18

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE
11 REGO PARK, NY 11374

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE
11 REGO PARK, NY 11374

Date Purchased & Ref : 11/26/19 PO#01209692 Date Received & Ref : 11/26/19

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
822 CHESAPEAKE DR
Address: CAMBRIDGE MD 21613

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Address: 822 CHESAPEAKE DR
CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 | Date Received & Ref: 09/28/20

SOLD TO:
Name:
Name:
Address:

Address:

Date Purchased & Ref : Date Received & Ref :

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT

NDC: 61958-2501-01

Lot Number Quantity Unique Serial #

Lot Number Quantity Unique Serial #

CDGXKA 5

Reference Number: INV 6901
Document Type: INVOICE

Reference Date:

09/28/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 333 Lakeside Drive, Foster City, CA 94404

SOLD TO: SHIPPED TO:

Name: Rochester Drug Co-Op Inc

Address: 116 Lehigh Dr #3013
Fairfield, NJ 07004

Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013
Fairfield, NJ 07004

Date Purchased & Ref: 09/04/18 PO#R2367 Date Received & Ref: 09/04/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX
Address: 235-20 147th Ave Rosedale, NY 11422 | Name: Address: 235-20 147th Ave Rosedale, NY 11422

Address.

Date Purchased & Ref: 10/15/18 PO#001IC545 Date Received & Ref: 10/15/18

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE
11 REGO PARK, NY 11374

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE
11 REGO PARK, NY 11374

Date Purchased & Ref : 11/25/19 PO#01209744 Date Received & Ref : 11/25/19

SOLD TO: SHIPPED TO:

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC
822 CHESAPEAKE DR
Address: CAMBRIDGE MD 21613

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Address: 822 CHESAPEAKE DR
CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 | Date Received & Ref: 09/28/20

SOLD TO:
Name:

SHIPPED TO:
Name:

Address: Address:

Date Purchased & Ref : Date Received & Ref :

- (A) is authorized as required under the Drug Supply Chain Security $\operatorname{\mathsf{Act}}$;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ

NDC: 49702-0231-13

Lot Number Quantity Unique Serial #
CE7N 1

Reference Number: INV6905

Document Type: INVOICE

Reference Date: 09/28/2020

(TH) Transaction History

Manufacturer's Name: ViiV Healthcare

Manufacturer's informationFive Moore Drive, Research Triangle Park, North Carolina 27709-3398

SOLD TO:
Name: Rochester Drug Co-Op Inc SHIPPED TO:
Name:

Name: Rochester Drug Co-Op Inc

Address: 116 Lehigh Dr #3013 Fairfield,

Name: Rochester Drug Co-Op Inc

Address: 116 Lehigh Dr #3013 Fairfield,

NJ 07004 NJ 07004

Date Purchased & Ref: 09/10/18 PO#R2376 Date Received & Ref: 09/10/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX Name: Instacare Pharmacy DBA Brookville RX

Address: 235-20 147th Ave Rosedale, NY 11422 Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: 10/28/18 PO#001IC568 Date Received & Ref: 10/28/18

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Purchased & Ref : 11/25/19 PO#01209744 | Date Received & Ref : 11/25/19

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR SAFE CHAIN SOLUTIONS, LLC

822 CHESAPEAKE DR B21613 B22 CHESAPEAKE DR CAMBRIDGE MD 21613 B22 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 Date Received & Ref: 09/28/20

SOLD TO:
Name:
Address:
SHIPPED TO:
Name:
Address:
Address:

Date Purchased & Ref : || Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security $\operatorname{\mathsf{Act}}$;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

REGO PARK, NY 11374

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT

NDC: 49702-0228-13

Lot Number Quantity Unique Serial #

CJ4V 1

Reference Number: INV6904

Document Type: INVOICE

Reference Date: 09/28/2020

(TH) Transaction History

Manufacturer's Name: ViiV Healthcare

Manufacturer's informationFive Moore Drive, Research Triangle Park, North Carolina 27709-3398

SOLD TO:
Name: Rochester Drug Co-Op Inc SHIPPED TO:
Name:

Name: Rochester Drug Co-Op Inc

Address: 116 Lehigh Dr #3013 Fairfield,

Name: Rochester Drug Co-Op Inc

Address: 116 Lehigh Dr #3013 Fairfield,

NJ 07004 NJ 07004

Date Purchased & Ref: 09/10/18 PO#R2376 Date Received & Ref: 09/10/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX Name: Instacare Pharmacy DBA Brookville RX

Address: 235-20 147th Ave Rosedale, NY 11422 Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: 10/09/18 PO#001IC534 Date Received & Ref: 10/09/18

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref : 11/26/19 PO#01209692 Date Received & Ref : 11/26/19

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR SAFE CHAIN SOLUTIONS, LLC

822 CHESAPEAKE DR B21613 B22 CHESAPEAKE DR CAMBRIDGE MD 21613 B22 CHESAPEAKE DR CAMBRIDGE MD 21613

Deta Descinad & Def. 1999/99

Date Purchased & Ref: 09/28/20 PO#9311 Date Received & Ref: 09/28/20

SOLD TO:
Name:
Address:

SHIPPED TO:
Name:
Address:

Date Purchased & Ref : || Date Received & Ref :

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT

NDC: 49702-0246-13

Lot Number	Quantity	Unique Serial #
FL5F	1	

Reference Number: **IN V6911 INVOICE Document Type:**

09/28/2020 **Reference Date:**

(TH) Transaction History

Manufacturer's Name: ViiV Healthcare

Manufacturer's informationFive Moore Drive, Research Triangle Park, North Carolina 27709-3398

SOLD TO: Name:

Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, Address:

NJ 07004

Name:

SHIPPED TO:

Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, Address:

NJ 07004

Date Received & Ref: 09/12/18 Date Purchased & Ref: 09/12/18 PO#R2380

SOLD TO:

Name: Instacare Pharmacy DBA Brookville RX

235-20 147th Ave Rosedale, NY 11422 Address:

SHIPPED TO:

Instacare Pharmacy DBA Brookville RX Name:

Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: PO#001IC553 10/17/18 Date Received & Ref: 10/17/18

SOLD TO:

Name:

BOULEVARD 9229 LLC

9229 QUEENS BLVD STE 11 Address:

REGO PARK, NY 11374

Name:

BOULEVARD 9229 LLC Address:

9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Purchased & Ref: Date Received & Ref: 11/26/19 11/26/19 PO#01209692

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref:

SHIPPED TO:

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE

MD 21613

Date Received & Ref: 09/28/20

SOLD TO: Name:

09/28/20

PO#9311

SHIPPED TO:

Name: Address:

Address:

Date Purchased & Ref:

Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

JULUCA TAB 30CT

NDC: 49702-0242-13

 Lot Number
 Quantity
 Unique Serial #

 R43R
 1

Reference Number: IN V 6909

Document Type: INVOICE

Reference Date: 09/28/2020

(TH) Transaction History

Manufacturer's Name: ViiV Healthcare

Manufacturer's informationFive Moore Drive, Research Triangle Park, North Carolina 27709-3398

SOLD TO:
Name: Rochester Drug Co-Op Inc SHIPPED TO:
Name:

Name: Rochester Drug Co-Op Inc Name: Rochester Drug Co-Op Inc Address: 116 Lehigh Dr #3013 Fairfield, Address: 116 Lehigh Dr #3013 Fairfield,

NJ 07004 NJ 07004

Date Purchased & Ref: 09/26/18 PO#R2402 Date Received & Ref: 09/26/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX Name: Instacare Pharmacy DBA Brookville RX

Address: 235-20 147th Ave Rosedale, NY 11422 Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: 10/24/18 PO#001IC564 Date Received & Ref: 10/24/18

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref : 11/26/19 PO#01209692 Date Received & Ref : 11/26/19

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR SAFE CHAIN SOLUTIONS, LLC

822 CHESAPEAKE DR CAMBRIDGE MD 21613 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 Date Received & Ref: 09/28/20

SOLD TO:
Name:
Address:

SHIPPED TO:
Name:
Address:

Date Purchased & Ref : Date Received & Ref :

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT

NDC: 49702-0228-13

Lot Number Quantity Unique Serial # SH7B

Reference Number: **IN V6903**

Document Type:

INVOICE

09/28/2020 **Reference Date:**

(TH) Transaction History

Manufacturer's Name: ViiV Healthcare

Manufacturer's informationFive Moore Drive, Research Triangle Park, North Carolina 27709-3398

SOLD TO:

Name: Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, Address:

NJ 07004

Date Purchased & Ref: 09/03/18 PO#R2365

SHIPPED TO:

Name: Rochester Drug Co-Op Inc 116 Lehigh Dr #3013 Fairfield, Address:

NJ 07004

Date Received & Ref: 09/03/18

SOLD TO:

Name: Instacare Pharmacy DBA Brookville RX

235-20 147th Ave Rosedale, NY 11422 Address:

SHIPPED TO:

Instacare Pharmacy DBA Brookville RX Name:

Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: PO#001IC566 10/25/18 Date Received & Ref: 10/25/18

SOLD TO:

Name:

BOULEVARD 9229 LLC

9229 QUEENS BLVD STE 11 Address:

REGO PARK, NY 11374

Date Purchased & Ref:

SHIPPED TO:

Name: **BOULEVARD 9229 LLC**

Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Received & Ref: 11/25/19 11/25/19 PO#01209744

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE

MD 21613

Date Received & Ref: 09/28/20

SOLD TO: Name: Address:

SHIPPED TO: Name:

Address:

Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ

NDC: 49702-0231-13

Lot Number	Quantity	Unique Serial #
X46V	1	

Reference Number: INV6906

Document Type: INVOICE

Reference Date:

09/28/2020

(TH) Transaction History

Manufacturer's Name: ViiV Healthcare

Manufacturer's informationFive Moore Drive, Research Triangle Park, North Carolina 27709-3398

SOLD TO: SHIPPED TO:

Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,

Name: Rochester Drug Co-Op Inc
Address: 116 Lehigh Dr #3013 Fairfield,

NJ 07004 NJ 07004

Date Purchased & Ref: 09/18/18 PO#R2389 Date Received & Ref: 09/18/18

SOLD TO: SHIPPED TO:

Name: Instacare Pharmacy DBA Brookville RX Name: Instacare Pharmacy DBA Brookville RX

Address: 235-20 147th Ave Rosedale, NY 11422 Address: 235-20 147th Ave Rosedale, NY 11422

Date Purchased & Ref: 10/23/18 PO#001IC562 Date Received & Ref: 10/23/18

SOLD TO: || SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref : 11/26/19 PO#01209692 Date Received & Ref : 11/26/19

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR SAFE CHAIN SOLUTIONS, LLC

822 CHESAPEAKE DR CAMBRIDGE MD 21613 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/28/20 PO#9311 Date Received & Ref: 09/28/20

00/20/20 1 0#3011

SOLD TO:
Name:
Address:
SHIPPED TO:
Name:
Address:
Address:

Date Purchased & Ref : | Date Received & Ref :

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.